NATIONAL COUNCIL OF NURSES IMPROVING ORGANIZATIONAL PERFORMANCE COMMITTEE CHARTER

I. INTRODUCTION

A. The NCON Improving Organization Performance (IOP) Committee is a standing committee which serves to assist NCON to improve organizational performance by tracking, monitoring, and evaluating projects, issues, and resolutions to completion. Technical support and resources are provided from Headquarters Nursing to achieve the mission and goals of the NCON IOP Committee.

B. MISSION:

Our mission is to promote customer satisfaction and to establish a system of performing organizational improvement through:

- 1. Assessing the needs of our customers. We define our primary customers as NCON and NCONA.
- 2. Identifying customer issues that are within the scope of NCON.
- Developing and recommending actions regarding structure and process issues that will contribute to problem-solving.
- 4. Identifying customers at all levels.
- 5. Fostering open lines of communication, respect for individual expression of ideas, and a climate that emphasizes excellence in product and service.

A. VISION:

Collect, document, and report on issues identified by NCON and NCONA as within our scope to improve nursing practice and customer service within I/T/Us.

I. SCOPE

- A. NCON will have oversight over all IOP. The NCON IOP Committee will serve as a clearinghouse for identified improvement processes. The Improving Organizational Performance Committee will also assist with the coordination and follow through of IOP activities by providing technical assistance consultation and tracking.
- B. The IOP Committee will assist NCON and its committees in improving organizational performance activities for services that fall within their respective areas. The IOP process will be applied to at least one category of customers for satisfaction of NCON services.

I. PROCESS FOR IMPROVING ORGANIZATIONAL PERFORMANCE

A. AUTHORITY:

The Principal Nurse Consultant has the ultimate authority and accountability for improving organizational performance within NCON. This is accomplished through NCON's IOP Committee, which serves as an advisory body utilizing the Plan Do Check Act (PDCA) problem-solving methodology.

B. OPPORTUNITIES FOR IMPROVEMENT:

Opportunities for improvement can be identified and brought to the IOP Committee through resolution or issue papers, which identify processes to be improved. See attached format for submitting issues to the NCON IOP Committee.

Upon receipt, the IOP Committee shall determine, by consensus, if the issue is to be addressed through the IOP process.

When issues are accepted, they will be assigned to the appropriate work group and tracked, monitored and reported using the PDCA tracking format. The assignments will consist of clear charges, negotiated time lines, and reporting requirements.

C. PROJECT SELECTION CRITERIA:

Projects will be evaluated using the following six criteria using a Likert scale from 1 to 5 (1= low priority; 5= high priority):

- 1. Is the issue within the scope of NCON?
- 2. Will there be a benefit to the customers?
- 3. Is there a benefit potential which will affect the greater number of customers?
- 4. Is there potential for improvement of outcome?
- 5. Is the time for change appropriate?
- 6. Are adequate resources (time, dollars, staff) available to address the issue?

Projects identified will be scored according to the above scale, totals given, and priority assigned. Projects not addressed will be referred back to the source with recommendations.

I. STRUCTURE

A. MEMBERSHIP:

The NCON IOP Committee will consist of six members and will always include the Principal Nurse Consultant, NCONA Chair, Nurse Recruiter, Advanced Practice Nurse and two members at large. Members of NCON can be appointed by the Principal Nurse or volunteer to fill the two remaining slots and any subsequent vacancies.

B. LENGTH OF COMMITTEE MEMBERSHIP:

- 1. The Principal Nurse Consultant will remain on the IOP Committee through his/her tenure in this position.
- 2. The NCONA Chair will remain on the IOP Committee throughout her term as Chair of NCONA.
- 3. All members other than the Principal Nurse Consultant and NCONA Chair will serve for two years.

A. OFFICERS OF THE IOP COMMITTEE:

- 1. Officers will consist of Chair, Co-Chair, and Secretary.
- 2. Terms of office will be one (1) year.
- 3. Assignment of roles will be made by consensus of the group annually in October.
- 4. In the case of vacancy, positions will be refilled as determined by the group.

A. DUTIES OF COMMITTEE OFFICERS:

- 1. The Chair establishes agendas, conducts meetings, and ensures completion of required business. The Chair also functions as liaison to NCON and reports to the larger group as required.
- 2. The Co-Chair assumes responsibilities of the Chair in his/her absence.

3. The Secretary takes minutes at all meetings, circulates minutes to the membership, compiles reports, and carries out other correspondence as assigned by the Improving Organizational Performance Committee Leader. He/She keeps all documents in order and establishes a chronological record of IOP committee activities.

A. FREQUENCY OF MEETINGS:

- 1. The IOP Committee will meet at least quarterly, or more often, as required, to complete necessary business.
- 2. Meetings may consist of teleconferences or actual group attendance when possible.
- 3. IOP meetings will also be held in conjunction with NCON meetings.

I. MECHANISMS FOR OVERSEEING

- The NCON group shall review the NCON IOP Committee charter on an annual basis.
- An annual report summarizing all the NCON IOP activities will be submitted to NCON.
- IOP will give a written report of activities at each quarterly meeting of NCON.
- Reports shall be distributed among all members of NCON and NCONA by methods to be determined.
- Each Project Chair will submit written reports to the NCON IOP Committee every 2 months. See the attached format.

Revised 12/99

ISSUE PAPER

Subr	nitted	
by:Date:		
I.	ISSUE:	
	 Is this within NCON's Scope of pre- Who are the customers and will the Is there a benefit, which will affect customers? Is there potential for improvement 	ere be a benefit to them? ct the greater number of
	 Is the time for change appropriate Are adequate resources (time, mor the issue? 	
I.	DISCUSSION	
II.	RECOMMENDATION:	
III.	PROJECT CHAIR:	
IV.	TIMELINE (How long until completion?):	
Acce	pted by IOP	·
	Chair	Date
Not A	Accepted	
	Chair	Date
Reco	mmendations of IOP Committee:	

PROJECT REPORTING FORMAT

Workgroup	Date
Project Chair:	
PROGRESS REVIEW:	
(What goals were accomplished from the pre	evious 2 months?)
ON TARGET What are your goals for the next 2 months?	
OFF TARGET How are you going to get back on target? W two months? What is the timeline involved?	hat are your goals for the next
Received	